

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AD</i>	<i>261</i>	<i>11/14/62</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>AD</i>	<i>26859</i>	<i>10-25-60</i>
RESPONSE FORMALITY REVIEW			<i>11-5-60</i>
			<i>11-2-61</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Best Available Copy

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
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If more than 150 claims or 10 actions  
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